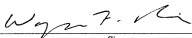
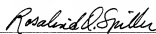
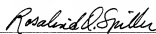
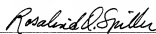


<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>DE919990082</b>				
Applicant(s): <b>Schaeck et al.</b>								
Application No. <b>09/731,509</b>	Filing Date <b>12/07/2000</b>	Examiner <b>Colin, Carl G.</b>	Customer No. <b>46369</b>	Group Art Unit <b>2136</b>	Confirmation No. <b>1249</b>			
Invention: <b>CONDITIONAL SUPPRESSION OF CARD HOLDER VERIFICATION</b>								
<u>COMMISSIONER FOR PATENTS:</u>								
Transmitted herewith is an amendment in the above-identified application.								
The fee has been calculated and is transmitted as shown below.								
<b>CLAIMS AS AMENDED</b>								
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE			
TOTAL CLAIMS	18    -	32    =	0	x    \$50.00	\$0.00			
INDEP. CLAIMS	2    -	6    =	0	x    \$210.00	\$0.00			
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00			
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>			
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>09-0463 (IBM)</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.								
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>								
 _____ Signature			Dated: <b>March 28, 2008</b>					
<b>Wayne F. Reinke, Esq.</b> <b>Heslin Rothenberg Farley &amp; Mesiti P.C.</b> <b>5 Columbia Circle</b> <b>Albany, NY 12203</b>  Telephone: 518-452-5600 Facsimile: 518-452-5579			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>           I hereby certify that this correspondence is being electronically transmitted to:            Mail Stop AF,            Commissioner for Patents,            P.O. Box 1450, Alexandria, VA 22313-1450,            on March 28, 2008.         </td> </tr> <tr> <td style="text-align: center;">             _____            Signature         </td> </tr> <tr> <td style="text-align: center;">           Rosalind Q. Spiller            _____            Typed or Printed Name         </td> </tr> </table>			I hereby certify that this correspondence is being electronically transmitted to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on March 28, 2008.	 _____ Signature	Rosalind Q. Spiller _____ Typed or Printed Name
I hereby certify that this correspondence is being electronically transmitted to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on March 28, 2008.								
 _____ Signature								
Rosalind Q. Spiller _____ Typed or Printed Name								
CC:								